

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS - AMERICAN UROLOGICAL ASSOCIATION PAC (UROPA)

A.

Full Name (Last, First, Middle Initial)

DAVIS, GEOFFREY C.

Transaction ID: SB23.18723

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	1	/	2	0	0	9

Mailing Address 1929 Wedgewood Lane

Amount of Each Disbursement this Period

1000.00									
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City Hebron State KY Zip Code 41048

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 04

B.

Full Name (Last, First, Middle Initial)

DAVIS, GEOFFREY C.

Transaction ID: SB23.18777

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	9

Mailing Address 1929 Wedgewood Lane

Amount of Each Disbursement this Period

1000.00									
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City Hebron State KY Zip Code 41048

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 04

C.

Full Name (Last, First, Middle Initial)

DEFEND AMERICA PAC

Transaction ID: SB23.18673

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	0	9

Mailing Address P.O. Box 2626

Amount of Each Disbursement this Period

2500.00									
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City Tuscaloosa State AL Zip Code 35403

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)